

Department of Health and Mental Hygiene - Maryland's 4th Annual Health Disparities Statewide Conference

Workforce and Cultural Diversity: A Public Health Forum

Diversifying Medical Education

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**April 24, 2007
Martin's West
Baltimore, Maryland**

University of Maryland School of Medicine

1807-2007



*University of Maryland
School of Medicine
is Committed to Diversity*



University of Maryland School of Medicine



University of Maryland School of Medicine is Committed to Diversity

Faculty, staff and students developed these clear statements on diversity as part of the School of Medicine's Strategic Plan, which is widely disseminated.

SOM Vision

We will seek excellence and innovation in Education, Research and Patient Care through the recruitment, development and retention of talented, culturally diverse faculty, staff, trainees and students.

SOM Values

The school will ensure diversity of faculty, trainees, staff and students.



Dean's Open Letter Series

♦ EDUCATION VISION

(Third in a series of four letters)

December 11, 2006

Dear Colleagues, Students, Alumni and Friends:

I am pleased with the initial reception of my first two open letters on our research and patient care missions. I am energized by the challenges and indeed the opportunities that lie ahead for the school and the university, and I am grateful to each of you for your support, collaboration and guidance.

In this third letter, I wish to address the mission of medical education, on which this great institution was founded 200 years ago. Since we train the vast majority of physicians practicing in the state, the impact of our educational mission on the health of Maryland and the region is enormous. Therefore, as we prepare the physicians and biomedical scientists of the future, it must always be our commitment to provide medical education of the highest caliber at every level.

As you know, medical education is under intense pressure nationwide, particularly in the clinical years where patient care increasingly competes for faculty time. Unfortunately, this comes at a time when the demands of preparing future physicians for the complexities and ambiguities of modern medical practice have never been greater. The impact of these pressures has been enormous, and education has become the most fragile of our tripartite missions nationwide. The University of Maryland School of Medicine has not escaped these trends.

At a time when more and more is expected of medical educators, time and resources for teaching grow more scarce. The shift of focus is now toward ambulatory care settings where many patients must be seen in a short period of time and the economic necessity of decreasing length of hospital stays disrupts the teaching process. In addition, the ever-escalating expansion of medical knowledge remains a fundamental challenge.

Despite these challenges, both in the basic sciences and in clinical programs, our gifted and committed teachers and academic programs in the School of Medicine under the leadership of Dr. Bruce Jarrell, vice dean for Research and Academic Affairs, are making extraordinary contributions to the future of medicine in Maryland and the nation. Their work is invaluable to our students and our society, and their commitment is inspirational. In order for our excellence in medical education to continue to thrive, I will ask department chairs to create and nurture a culture in which superlative teaching is honored and exceptional teachers



are rewarded. The curriculum comprehensive enough to accommodate the variable career paths of our graduates. We are seeing nontraditional students enter the field, many of whom have backgrounds beyond clinical medicine. Many students also have varying interests, such as interests in law, health, politics, health policy, and business. Therefore, the medical education we provide, by necessity, must be broad enough to accommodate

diversity of interests among the student body. Therefore, to that extent, I will work with the leadership team to explore the following possibilities:

- Taking advantage of our proximity to the U.S. Government, to the diplomatic services, etc., to create the medical curriculum options for emphasis areas, minors, for students who do not wish to pursue joint degrees. Such emphasis options or minors may include government relations, health policy, international affairs, politics and government.
- The School of Medicine will also continue its emphasis on joint degree programs and thus expand its portfolio to include joint degrees with law (MD/JD or PhD/JD), business (MD/MBA or PhD/MBA), and with other areas where a masters degree can be pursued (MD/MS or PhD/MS) in health policy, government relations, translational research, to name a few.
- In terms of method of instruction, we are now learning that an integrated approach to instruction is preferable to a discipline-based method. There are also preliminary discussions underway about introducing into the medical curriculum a research competency, where students will be taught basic principles of research methods, design and analysis early in their medical education. This educational enrichment will be explored.

If our students are to achieve at the levels set out in this five-year vision plan, members of the faculty must commit to their own professional development, staying current in effective teaching methods, modalities and technologies. I urge the faculty to take advantage of all faculty development initiatives and fully exercise the true spirit of academic citizenship. Furthermore, I ask that everyone become fully engaged in this extraordinary community of scholars by participating in departmental and school-wide enrichment seminars,



distinguished lecture series and other scholarly venues of enrichment.

Synopsis of the Five-Year Vision Plan

Synopsis of the Five-Year Vision Plan

“The quality of the educational experience is enriched by the composition of the student body; therefore we must pay particular attention to the quality and diversity of applicants.”

I hope that this open letter series challenges you and leaves you with some “food for thought.” All of your ideas and input are important as we move forward together toward meeting our goals. As you reflect on this letter, please feel free to give me a call or send me an email with your thoughts. I don’t want to be the only one “talking.” I want to do my share of listening too.

In my next letter after the holidays, I will take a look at our finance and philanthropy enterprise, which is becoming increasingly more important in enabling us to pursue our missions of discovery, educating the next generation and providing expert medical care to those in need.

In partnership, we continue in our relentless pursuit of excellence, everyday.

Sincerely yours,

E. Albert Reece, MD, PhD, MBA

Vice President for Medical Affairs, University of Maryland
John Z. and Alaka K. Bowers Distinguished Professor and
Dean, School of Medicine

and outcomes

- Enhance comprehensive tertiary and quaternary care programs
- Create new paradigms for clinical care
- Achieve greater national recognition for our superlative clinical expertise

♦ EDUCATION

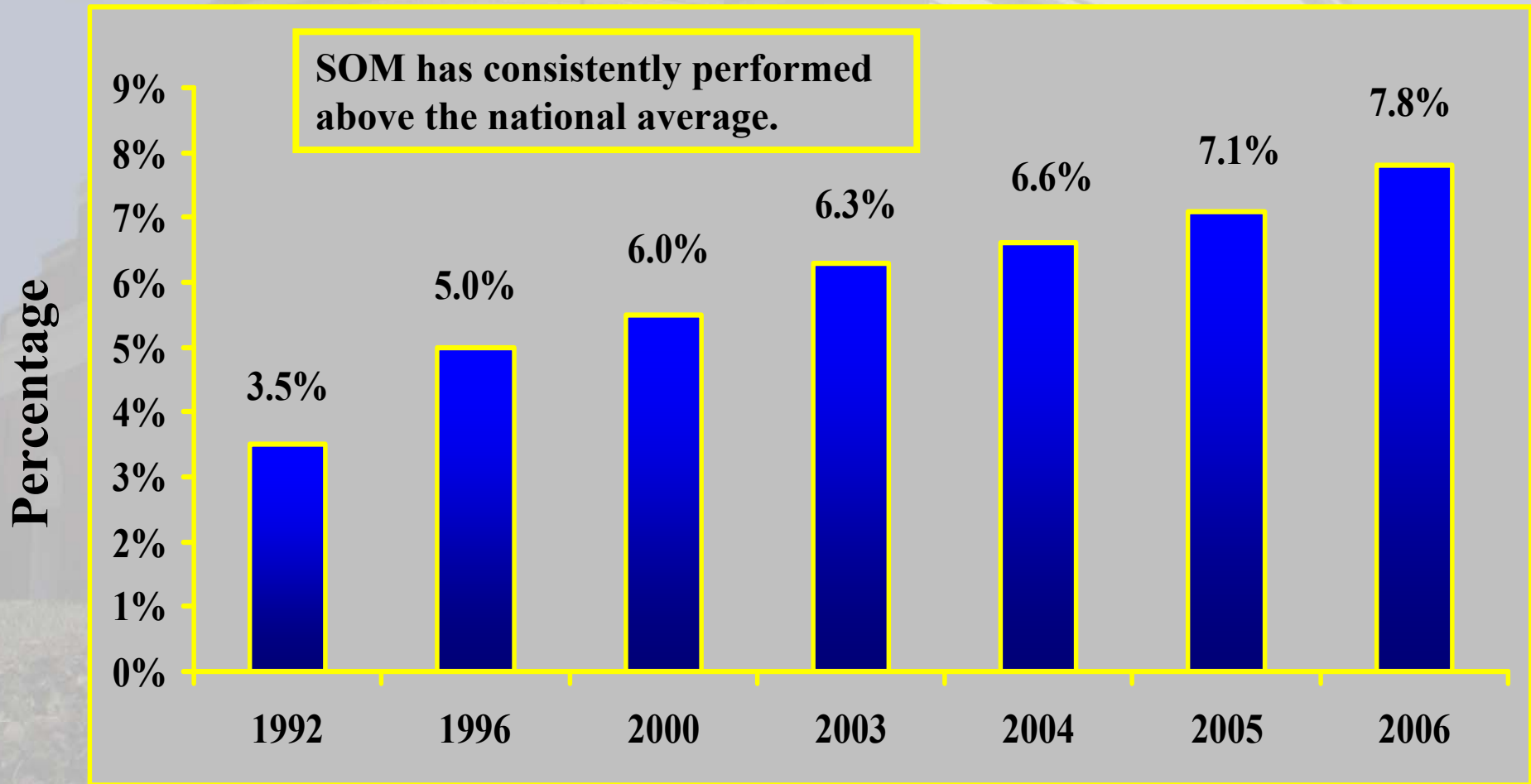
Emphasize excellence in unique & contemporary programs

- Enhance interdisciplinary educational focus
- Become known for joint degrees, diplomas or certificate programs in special emphasis areas (e.g., government, policy, politics and research)
- New educational models (e.g., simulations, etc.)
- Enhance educational scholarship and publication
- Achieve national recognition for our unique & joint-degree programs



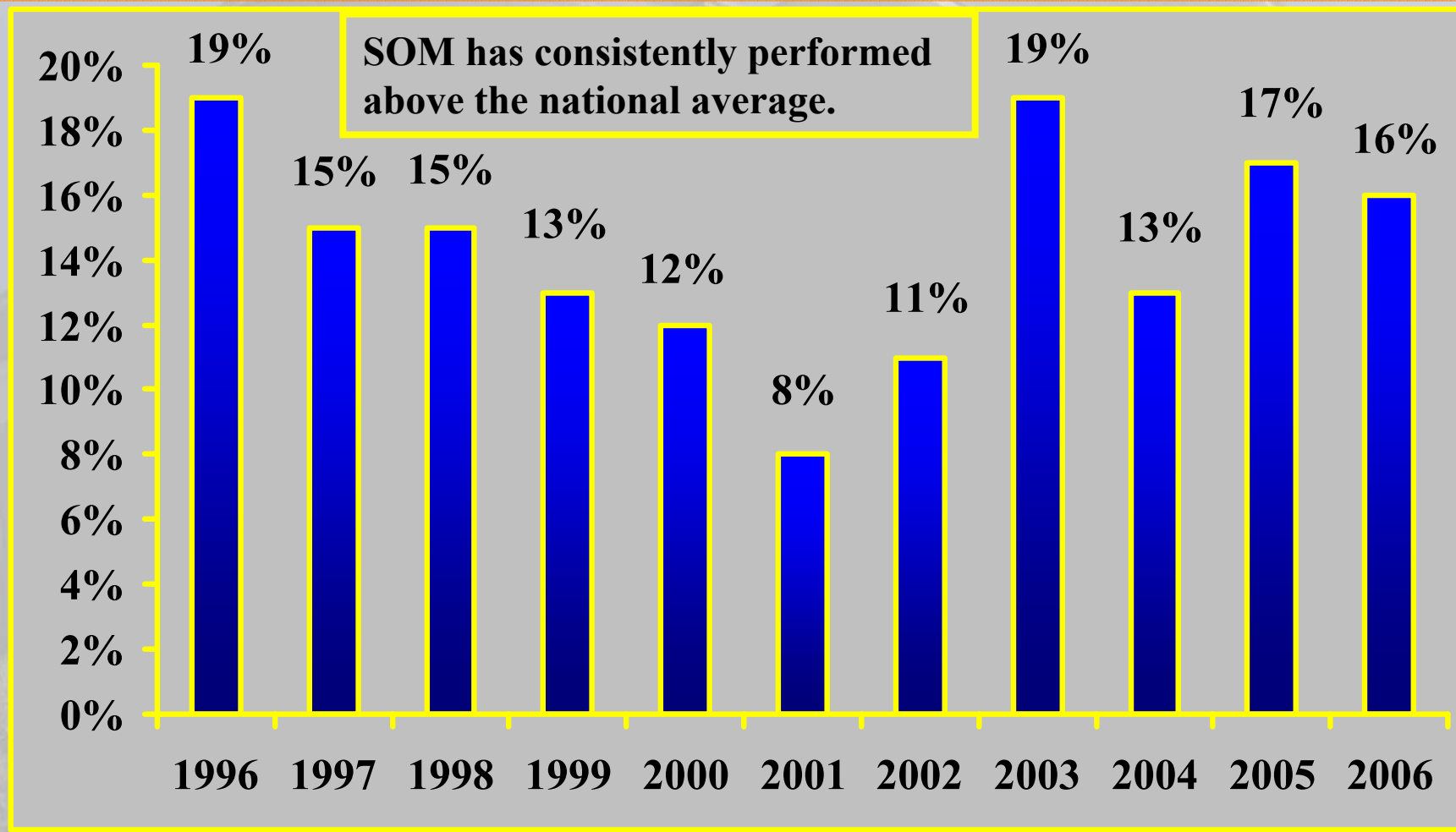
SOM Underrepresented (URM) Full-Time Faculty

1992 – 2006



SOM Underrepresented (URM) Medical Students

1st Year Class, 1996-2006



SOM Average : 14%

National Average: 12%





**Why have we been successful
and what are we doing?**

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The Institutional Climate



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Minority Leadership

Medical School Leadership is sensitive and committed to the need for increased diversity.

- **12% Department Chairs**
- **19% Assistant/Associate Dean**



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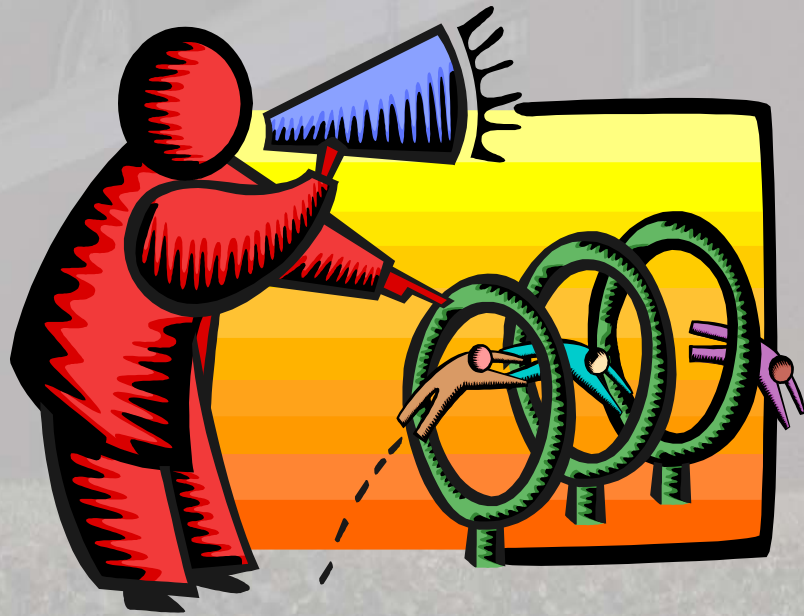
SOM has a welcoming environment for all students, faculty and postdoctoral fellows.

- **Minority students and faculty serve on SOM governance bodies and committees.**
- **Student National Medical Association: established in 1964 and focuses on the needs, concerns and issues of URM students.**
- **Opportunities for minority students and faculty to network through the Minorities in Medicine Series.**
- **Other venues.**



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The Admissions Process



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SOM Admissions Committee

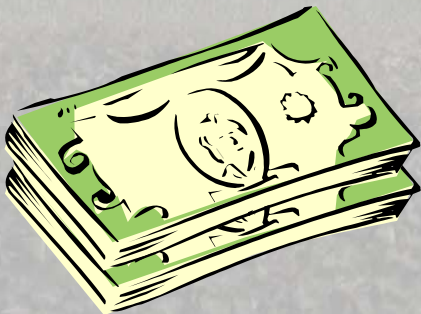
- **Diverse membership.**
- **Strong efforts to sensitize faculty and student interviewers by conducting seminars on importance of diversity in the education process.**



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Reducing the Financial Barriers is a Priority

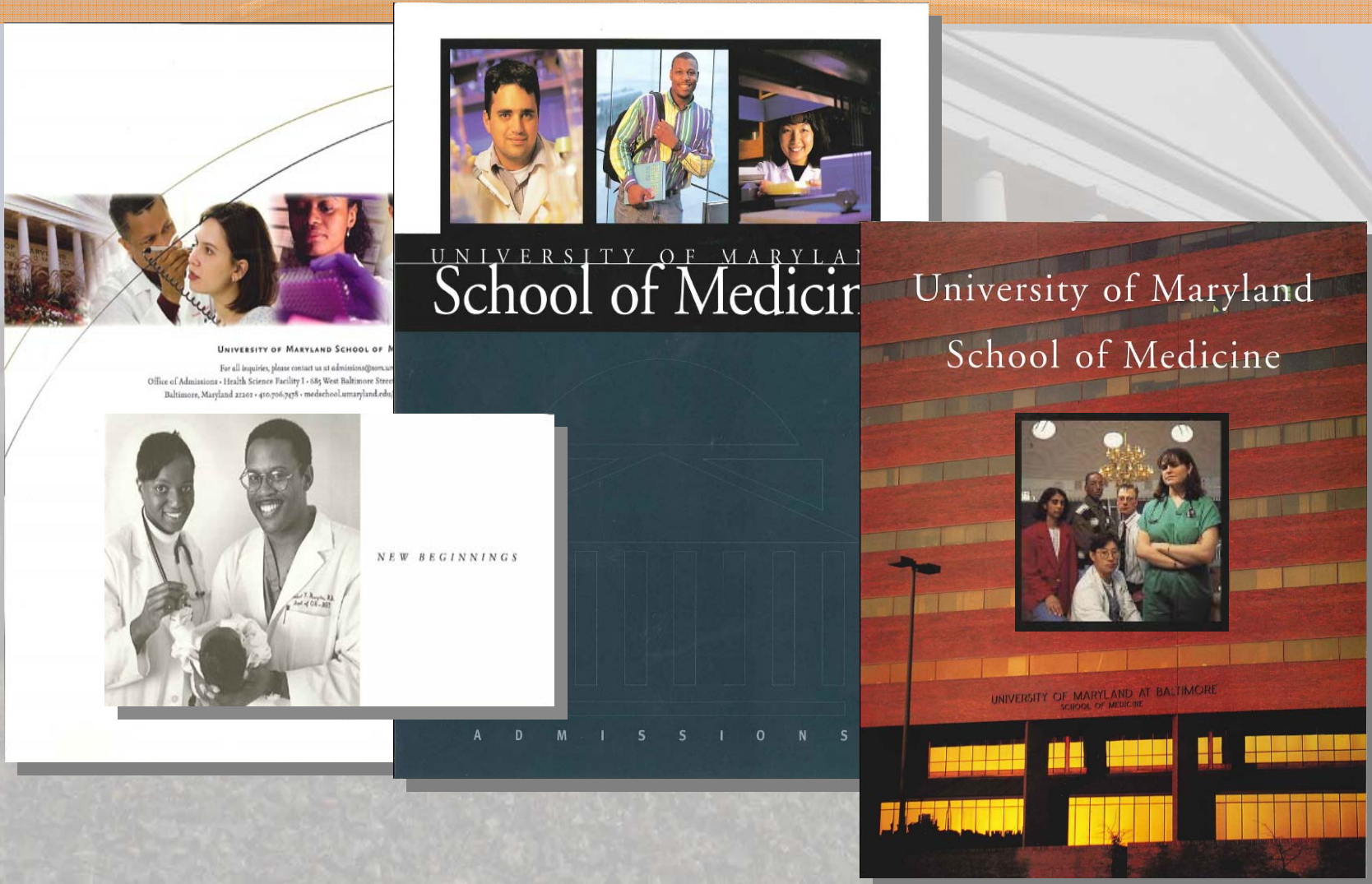
- **SOM Diversity Scholarship: Average was \$21,600/year, for four years.**
- **SOM Development Office is working to increase student scholarship funding.**
- **A Scholarship Committee oversees the award process for talented disadvantaged and minority students.**



Still A Significant Factor

Redesigned SOM Admission's Publications

With Appeal To A Diverse Applicant Pool



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Recruitment Visits

- **Regional Summer Enrichment Programs for underrepresented and disadvantaged students to encourage careers in science.**
- **Historically Black Colleges and Universities (HBCUs).**
- **Regional colleges and universities producing the highest number of URM students going to medical school.**



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Minority & Disadvantaged Student Recruitment Activities

- **Meyerhof Summer Bridge Program**
 - Designed to highlight the strengths at the SOM and encourage careers as physicians and scientists
- **Summer Research Programs**
 - Interaction and follow up with students from SOM summer program which includes a number of minority and disadvantaged students



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Program Initiatives to Support Diversity:

1. Career Fairs
2. Tours of Schools
3. Summer Research
4. SNMA
5. Pre-Matriculation Summer Program
6. Mini-Medical Schools



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- **Attend Careers Fairs**
 - elementary
 - middle school
 - high school
 - college and university graduate and professional schools
- **Host Tours** for elementary, middle and junior high school students to provide opportunities to learn about careers in the health professions
- **Summer Research Program**
 - Vivian Thomas Medical Arts Academy

Places 30 students with SOM faculty to provide research and lab experience



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- **Student National Medical Association (SNMA)**
 - Host minority applicants during their interview visits
 - Works with the Student Research Office to encourage youth in Baltimore to access the following programs:
 - Youth Scientist Enrichment Program
 - Health Professions Recruitment and Exposure Program
- **Prematriculation Summers Program (PSP)**
 - Assist incoming students gain a head start in course work
 - Recruits URM students as teachers in the program
 - Recruits African-American teachers for the program



University of Maryland SOM Mini-Med

New High School Mini-Medical School

Provides high school students with interactive classroom instruction on medical subjects. The classes are taught by SOM medical students.

Participants learn:

- Different health subject that can impact families and communities**
- How to break cycles of health care disparities and create positive change in their families and communities**
- How to take an active role in maintaining their own health**



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Mini-Med School

Year	2001	2002	2003	2004	2005	2006
Participants	80	120	150	160	165	150

Baltimore: Fall 2000 – Fall 2007

Eastern Shore: Fall 2004, 2005 & 2006

Western Maryland: Spring 2005 & 2006

Montgomery County: Mini-Med in Spanish – Fall 2005

Southern Maryland: Fall 2006

--Mini-Med for Kids – August

--Mini-Med for high school students - 2007

More students are participating from elementary, middle, high schools and colleges



Enhancing Cultural Competency in the Medical School Curriculum

- We addressed cultural competency in SOM curriculum revision of 1994-1998
- During orientation medical students receive lectures and exercises which address:
 - cultural diversity
 - minority health
 - health disparities
- During the 1st year:
 - students focus on how to interview patients
 - directly address cultural issues and the need for competence in this area



Enhancing Cultural Competency in the Medical School Curriculum (cont.)

- **During the 2nd year**
 - students learn the fundamentals of disease entities
 - information on emerging disparities in the literature is imparted
- **During the 4th year**
 - students rotate in Area Health Education Center (AHEC) in underserved areas where minority health and health disparities are a primary concern.
 - Eastern Shore
 - Western Maryland
 - Baltimore City



SOM Program in Minority Health and Health Disparities Education and Research (PMHHD) Est. 2006

- **Directed by Donald E. Wilson, MD, MACP,
dean emeritus**
- **Built upon the existing Center for Health
Disparities, directed by:**

Claudia Baquet, MD, MPH

Professor of Medicine

Associate Dean for Policy and Planning



Why Have We Been Successful?

Summary:

- **Commitment to diversity from leadership and the SOM organization**
- **Emphasis on diversity in SOM Strategic Plan**
- **Meaningful representation of minorities in leadership positions and on policy making committees**
- **Revised curriculum includes cultural competency segments throughout the curriculum**



Why Have We Been Successful?

Summary:

- Support for special training programs for minorities and disadvantages students who are interested in careers in science and medicine
- Faculty serve as mentors and role models for students
- Development of support program for students who are having academic difficulties, including individual counseling, tutorial programs etc.
- Development of Program in Minority Health and Health Disparities Education and Research



Are We There Yet?



**The Future of Our Nation Depends on a Diverse,
Multi-Cultural Workforce**

Thank you!



America's Oldest Public Medical School

Bicentennial Celebration 1807-2007

Where Discoveries Make Better

Medicine *University of Maryland School of Medicine*

